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| United States Bankruptcy Court<br>Northern District of Illinois  |   |   |   |                                       | Voluntary  | Petition                                     |   |                                  |
|--|---|---|---|---------------------------------------|--|--|---|----------------------------------|
| Name of Debtor (if individual, enter Last, First Allen, Shirley  | , Middle):  |   | Name  | of Joint De                           | ebtor (Spouse)   | ) (Last, First                               | t, Middle):   |                                  |
| All Other Names used by the Debtor in the last (include married, maiden, and trade names):  AKA Shirley Cossey   | 8 years   |   |   |                                       | used by the J maiden, and  |  | in the last 8 years<br>):   |                                  |
| Last four digits of Soc. Sec. or Individual-Taxp (if more than one, state all)  xxx-xx-1905  | ayer I.D. (ITIN)/Com  | plete EIN                                   | Last fo   | our digits o                          | f Soc. Sec. or   | Individual-                                  | Taxpayer I.D. (ITIN) No   | )./Complete EIN                  |
| Street Address of Debtor (No. and Street, City, 7843 Colfax Ave 2nd Floor Chicago, IL  | and State):   | ZIP Code                                    | Street  | Address of                            | Joint Debtor   | (No. and St                                  | reet, City, and State):   | ZIP Code                         |
|  | Γ   | 60649                                       | 1   |                                       |  |  |   | ZIF Code                         |
| County of Residence or of the Principal Place of Cook  |   | 300.0                                       | Count   | y of Reside                           | ence or of the   | Principal Pl                                 | ace of Business:  |                                  |
| Mailing Address of Debtor (if different from str   | eet address):   |   | Mailir  | g Address                             | of Joint Debte   | or (if differe                               | ent from street address):   |                                  |
|  | Г   | ZIP Code                                    | -   |                                       |  |  |   | ZIP Code                         |
| Location of Principal Assets of Business Debto<br>(if different from street address above):  |   |   |   |                                       |  |  |   |                                  |
| Type of Debtor (Form of Organization) (Check one box)  |   | of Business                                 |   |                                       |  |  | ptcy Code Under Whice iled (Check one box)  | :h                               |
| Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  □ Corporation (includes LLC and LLP)  □ Partnership  □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)  Chapter 15 Debtors  Country of debtor's center of main interests: |   | eal Estate as do 101 (51B) oker ompt Entity | efined  | Chapt Chapt Chapt Chapt Chapt         | er 7<br>er 9<br>er 11<br>er 12<br>er 13  | Cof  | hapter 15 Petition for Ref a Foreign Main Procee hapter 15 Petition for Ref a Foreign Nonmain Proceed of Debts k one box) | eding<br>ecognition<br>occeeding |
| Each country in which a foreign proceeding by, regarding, or against debtor is pending:  | Debtor is a tax-es<br>under Title 26 of<br>Code (the Interna                  | the United State                            | es .  | defined<br>"incurr                    | are primarily co<br>I in 11 U.S.C. §<br>ed by an indivi-<br>onal, family, or l | 101(8) as<br>dual primarily<br>household pur | busine<br>/ for<br>rpose."  | are primarily<br>ess debts.      |
| Filing Fee (Check one both Full Filing Fee attached  Filing Fee to be paid in installments (applicable to attach signed application for the court's consideral debtor is unable to pay fee except in installments. Form 3A.  Filing Fee waiver requested (applicable to chapter                          | individuals only). Mus<br>ion certifying that the<br>Rule 1006(b). See Office | t Check if: Deb                             | otor is a sr<br>otor is not<br>otor's aggr<br>less than | regate nonco<br>\$2,490,925 (e boxes: | debtor as defin<br>ness debtor as d<br>ntingent liquida<br>amount subject      | efined in 11 U                               |   |                                  |
| attach signed application for the court's considerat   |   | BB. Acc                                     | eptances  | of the plan w                         | this petition.<br>vere solicited pr<br>S.C. § 1126(b).                         | epetition fron                               | n one or more classes of cre  | editors,                         |
| Statistical/Administrative Information  ☐ Debtor estimates that funds will be available ☐ Debtor estimates that, after any exempt proper there will be no funds available for distribute.  | erty is excluded and  | administrative                              |   | es paid,                              |  | THIS   | S SPACE IS FOR COURT  | USE ONLY                         |
| Estimated Number of Creditors  | 1,000-<br>5,000 5,001-<br>10,000  |   | ]<br>5,001-<br>0,000                                    | 50,001-<br>100,000                    | OVER<br>100,000  |  |   |                                  |
| Estimated Assets  SO to \$50,001 to \$100,001 to \$500,001 to \$1 million  | \$1,000,001 \$10,000,001 to \$10 to \$50 million                              | to \$100 to                                 | ]<br>100,000,001<br>\$500<br>illion                     | \$500,000,001<br>to \$1 billion       |  |  |   |                                  |
| Estimated Liabilities  | \$1,000,001 \$10,000,001 to \$10 to \$50                                      | \$50,000,001 \$1 to \$100 to                | ]<br>100,000,001<br>\$500                               | \$500,000,001 to \$1 billion          |  |  |   |                                  |

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| B1 (Official For                               | m 1)(04/13)  | Page 2 01 44  | Page 2  |
|--|--|---|---|
| Voluntary                                      | y Petition   | Name of Debtor(s): Allen, Shirley   |   |
| (This page mu                                  | st be completed and filed in every case)   | Allen, Shiney   |   |
|  | All Prior Bankruptcy Cases Filed Within Last   | 8 Years (If more than two, attach ac  | dditional sheet)  |
| Location<br>Where Filed:                       | ilnbke   | Case Number:<br>13-bk-46466   | Date Filed: 12/03/13  |
| Location<br>Where Filed:                       | ilnbke   | Case Number:<br>12-bk-47363   | Date Filed: 11/30/12  |
| Per  | nding Bankruptcy Case Filed by any Spouse, Partner, or   | Affiliate of this Debtor (If more tha   | n one, attach additional sheet)   |
| Name of Debto<br>- None -                      | or:  | Case Number:  | Date Filed:   |
| District:                                      |  | Relationship:   | Judge:  |
|  | Exhibit A  |   | xhibit B 1 whose debts are primarily consumer debts.)   |
| forms 10K as<br>pursuant to S<br>and is reques | leted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission ection 13 or 15(d) of the Securities Exchange Act of 1934 ting relief under chapter 11.)  A is attached and made a part of this petition. | I, the attorney for the petitioner name<br>have informed the petitioner that [he<br>12, or 13 of title 11, United States Co | d in the foregoing petition, declare that I or she] may proceed under chapter 7, 11, de, and have explained the relief available tify that I delivered to the debtor the notice  September 23, 2015 |
| L'Amort  | Y is attached and made a part of this pedition.  | Signature of Attorney for Debtor(s<br>Margaret Molloy 6317096   |   |
|  | Exh  | <u>l</u><br>ibit C  |   |
|  | r own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.   | pose a threat of imminent and identifiabl   | e harm to public health or safety?  |
|  | Exh  | ibit D  |   |
| _  | eted by every individual debtor. If a joint petition is filed, ear D completed and signed by the debtor is attached and made and petition:   | -   | a separate Exhibit D.)  |
| ☐ Exhibit 1                                    | D also completed and signed by the joint debtor is attached a  | and made a part of this petition.   |   |
|  | Information Regardin   | _   |   |
| _  | (Check any ap  | •   | 4- in this District for 190   |
| -  | Debtor has been domiciled or has had a residence, principal days immediately preceding the date of this petition or for  |   |   |
|  | There is a bankruptcy case concerning debtor's affiliate, ge   | eneral partner, or partnership pending  | in this District.   |
|  | Debtor is a debtor in a foreign proceeding and has its princ<br>this District, or has no principal place of business or assets<br>proceeding [in a federal or state court] in this District, or the<br>sought in this District.                            | in the United States but is a defenda   | nt in an action or  |
|  | Certification by a Debtor Who Reside   |   | rty   |
|  | (Check all app<br>Landlord has a judgment against the debtor for possession  |   | , complete the following.)  |
|  | (Name of landlord that obtained judgment)  |   |   |
|  | (Table of Mindood that obtained judgment)  |   |   |
|  |  |   |   |
|  |  |   |   |
|  | (Address of landlord)  |   |   |
|  | Debtor claims that under applicable nonbankruptcy law, the   |   |   |
|  | the entire monetary default that gave rise to the judgment for Debtor has included with this petition the deposit with the after the filing of the petition.   |   | •   |
|  | Debtor certifies that he/she has served the Landlord with the  | nis certification. (11 U.S.C. § 362(1)).  |   |

#### **B1** (Official Form 1)(04/13)

Voluntary Petition

(This page must be completed and filed in every case)

## Signatures

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Shirley Allen

Signature of Debtor Shirley Allen

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

September 23, 2015

Date

#### Signature of Attorney\*

X /s/ Margaret Molloy

Signature of Attorney for Debtor(s)

Margaret Molloy 6317096

Printed Name of Attorney for Debtor(s)

THE SEMRAD LAW FIRM, LLC

Firm Name

20 S. Clark Street

28th Floor

Chicago, IL 60603

Address

Email: rsemrad@semradlaw.com

(312) 913 0625 Fax: (312) 913 0631

Telephone Number

September 23, 2015

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

#### Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Allen, Shirley

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

 $\mathbf{X}$ 

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

### United States Bankruptcy Court Northern District of Illinois

| In re | Shirley Allen |           | Case No. |   |
|-------|---------------|-----------|----------|---|
|       |               | Debtor(s) | Chapter  | 7 |

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

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| B 1D (Official Form 1, Exhibit D) (12/09) - Cont.   | Page 2  |
|---|---|
| deficiency so as to be incapable of realizing a responsibilities.);  □ Disability. (Defined in 11 U.S.C. § unable, after reasonable effort, to participate it through the Internet.); | 109(h)(4) as impaired by reason of mental illness or mental and making rational decisions with respect to financial 109(h)(4) as physically impaired to the extent of being in a credit counseling briefing in person, by telephone, or |
| ☐ Active military duty in a military co   | ombat zone.   |
| ☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in  | administrator has determined that the credit counseling this district.  |
| I certify under penalty of perjury that the   | information provided above is true and correct.   |
| Signature of Debtor:  | /s/ Shirley Allen Shirley Allen   |
| Date: September 23, 2   | 2015  |

В

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B6 Summary (Official Form 6 - Summary) (12/14)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | Shirley Allen |        | Case No. |   |  |
|-------|---------------|--------|----------|---|--|
|       |               | Debtor |          |   |  |
|       |               |        | Chapter  | 7 |  |

### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE   | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES | OTHER  |
|--|----------------------|------------------|-------------------|-------------|--------|
| A - Real Property  | Yes                  | 1                | 0.00              |             |        |
| B - Personal Property  | Yes                  | 3                | 10,054.00         |             |        |
| C - Property Claimed as Exempt   | Yes                  | 1                |                   |             |        |
| D - Creditors Holding Secured Claims   | Yes                  | 1                |                   | 15,860.00   |        |
| E - Creditors Holding Unsecured<br>Priority Claims (Total of Claims on Schedule E) | Yes                  | 2                |                   | 3,200.00    |        |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                              | Yes                  | 4                |                   | 34,561.00   |        |
| G - Executory Contracts and<br>Unexpired Leases                                    | Yes                  | 1                |                   |             |        |
| H - Codebtors  | Yes                  | 1                |                   |             |        |
| I - Current Income of Individual<br>Debtor(s)                                      | Yes                  | 2                |                   |             | 839.00 |
| J - Current Expenditures of Individual<br>Debtor(s)                                | Yes                  | 2                |                   |             | 835.00 |
| Total Number of Sheets of ALL Schedu   | ıles                 | 18               |                   |             |        |
|  | T                    | otal Assets      | 10,054.00         |             |        |
|  |                      |                  | Total Liabilities | 53,621.00   |        |

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B 6 Summary (Official Form 6 - Summary) (12/14)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | Shirley Allen |        | Case No. |   |
|-------|---------------|--------|----------|---|
| _     | <u> </u>      | Debtor |          |   |
|       |               |        | Chapter  | 7 |

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C.  $\S$  159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability   | Amount   |
|---|----------|
| Domestic Support Obligations (from Schedule E)  | 0.00     |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | 3,200.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00     |
| Student Loan Obligations (from Schedule F)  | 0.00     |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E                | 0.00     |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | 0.00     |
| TOTAL   | 3,200.00 |

#### State the following:

| Average Income (from Schedule I, Line 12)  | 839.00 |
|--|--------|
| Average Expenses (from Schedule J, Line 22)  | 835.00 |
| Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14) | 839.00 |

#### State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY" column                  |          | 6,785.00  |
|--|----------|-----------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column             | 3,200.00 |           |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |          | 0.00      |
| 4. Total from Schedule F   |          | 34,561.00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |          | 41,346.00 |

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| R6A | (Official | Form | 64) | (12/07) |
|-----|-----------|------|-----|---------|

| In re | Shirley Allen | Case No |  |
|-------|---------------|---------|--|
| _     | <u> </u>      |         |  |
|       |               | Debtor  |  |

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > 0.00 (Total of this page)

Total > 0.00

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

| In re | Shirley Allen | Case No |
|-------|---------------|---------|
| _     |               | Debtor  |

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|--------------------------------------|---|---|
| 1.  | Cash on hand  | Χ                |                                      |   |   |
| 2.  | Checking, savings or other financial  | Chase            | e bank checking account              | -   | 154.00  |
|     | accounts, certificates of deposit, or<br>shares in banks, savings and loan,<br>thrift, building and loan, and<br>homestead associations, or credit<br>unions, brokerage houses, or<br>cooperatives. | Capita           | al One secured credit card           | -   | 300.00  |
| 3.  | Security deposits with public utilities, telephone companies, landlords, and others.  | X                |                                      |   |   |
| 4.  | Household goods and furnishings, including audio, video, and computer equipment.  | Used             | furniture                            | -   | 350.00  |
| 5.  | Books, pictures and other art<br>objects, antiques, stamp, coin,<br>record, tape, compact disc, and<br>other collections or collectibles.   | X                |                                      |   |   |
| 6.  | Wearing apparel.  | Used             | clothing                             | -   | 400.00  |
| 7.  | Furs and jewelry.   | Misc.            | costume jewelry                      | -   | 75.00   |
| 8.  | Firearms and sports, photographic, and other hobby equipment.   | X                |                                      |   |   |
| 9.  | Interests in insurance policies.<br>Name insurance company of each<br>policy and itemize surrender or<br>refund value of each.  | X                |                                      |   |   |
| 10. | Annuities. Itemize and name each issuer.  | X                |                                      |   |   |
|     |   |                  |                                      |   |   |
|     |   |                  |                                      | G 1 75 ·                                    | 1 070 00  |

2 continuation sheets attached to the Schedule of Personal Property

1,279.00

Sub-Total >

(Total of this page)

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B6B (Official Form 6B) (12/07) - Cont.

| In re | Shirley Allen | Case No |
|-------|---------------|---------|
|       |               | Debtor  |

## SCHEDULE B - PERSONAL PROPERTY

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|--------------------------------------|---|---|
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | Х                |                                      |   |   |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   | X                |                                      |   |   |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize.   | X                |                                      |   |   |
| 14. | Interests in partnerships or joint ventures. Itemize.   | Χ                |                                      |   |   |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments.  | X                |                                      |   |   |
| 16. | Accounts receivable.  | X                |                                      |   |   |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.  | X                |                                      |   |   |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars.  | Χ                |                                      |   |   |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.  | X                |                                      |   |   |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X                |                                      |   |   |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X                |                                      |   |   |
|     |   |                  | (Total                               | Sub-Tota of this page)                      | al > 0.00   |

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B6B (Official Form 6B) (12/07) - Cont.

| In re | Shirley Allen | Case No. |
|-------|---------------|----------|
| _     |               |          |

Debtor

### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property          | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|---|---|---|
| 22. | Patents, copyrights, and other intellectual property. Give particulars.   | Х                |   |   |   |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.  | Х                |   |   |   |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |   |   |   |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories.  | 20               | 012 Nissan Sentra with estimated 31,000 miles | -   | 8,775.00  |
| 26. | Boats, motors, and accessories.   | Χ                |   |   |   |
| 27. | Aircraft and accessories.   | Χ                |   |   |   |
| 28. | Office equipment, furnishings, and supplies.  | Х                |   |   |   |
| 29. | Machinery, fixtures, equipment, and supplies used in business.  | Х                |   |   |   |
| 30. | Inventory.  | Χ                |   |   |   |
| 31. | Animals.  | Χ                |   |   |   |
| 32. | Crops - growing or harvested. Give particulars.   | Χ                |   |   |   |
| 33. | Farming equipment and implements.   | Х                |   |   |   |
| 34. | Farm supplies, chemicals, and feed.   | Χ                |   |   |   |
| 35. | Other personal property of any kind not already listed. Itemize.  | X                |   |   |   |

Sub-Total >
(Total of this page)
Total >

Sheet 2 of 2 continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

8,775.00

10,054.00

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B6C (Official Form 6C) (4/13)

| In re | Shirley Allen | Case No |
|-------|---------------|---------|
| _     |               | Debtor  |

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled under: | ☐ Check if debtor claims a homestead exemption that exceeds                          |
|---|--|
| (Check one box)   | \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter |
| ☐ 11 U.S.C. §522(b)(2)  | with respect to cases commenced on or after the date of adjustment.)                 |
| ■ 11 U.S.C. §522(b)(3)  |  |

| Description of Property   | Specify Law Providing<br>Each Exemption          | Value of<br>Claimed<br>Exemption | Current Value of<br>Property Without<br>Deducting Exemption |
|---|--|----------------------------------|---|
| Checking, Savings, or Other Financial Accounts, Chase bank checking account | Certificates of Deposit<br>735 ILCS 5/12-1001(b) | 154.00                           | 154.00  |
| Household Goods and Furnishings Used furniture                              | 735 ILCS 5/12-1001(b)                            | 350.00                           | 350.00  |
| Wearing Apparel Used clothing   | 735 ILCS 5/12-1001(a)                            | 400.00                           | 400.00  |
| Furs and Jewelry Misc. costume jewelry                                      | 735 ILCS 5/12-1001(b)                            | 75.00                            | 75.00   |

Total: 979.00 979.00

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B6D (Official Form 6D) (12/07)

| In re | Shirley Allen | Case No.    |
|-------|---------------|-------------|
| _     |               | ,<br>Debtor |

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | COD EBTOR | N<br>H       | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT  | LIQUI                 | ΙFΙ | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
|--|-----------|--------------|--|-------------|-----------------------|-----|--|---------------------------------|
| Account No.  | Ι         |              | Capital One secured credit card  | ┑╸          | D<br>A<br>T<br>E<br>D |     |  |                                 |
| Capital One<br>P.O. Box 85015<br>Richmond, VA 23285  |           | -            |  |             |                       |     |  |                                 |
|  | Ļ         | 1            | Value \$ 300.00  | 1           |                       |     | 300.00   | 0.00                            |
| Account No. xxxxxxxxxxxx1000   | 1         |              | Opened 3/01/15 Last Active 8/04/15   |             |                       |     |  |                                 |
| Santander Consumer Usa<br>Po Box 961245<br>Ft Worth, TX 76161  | X         | :  <br>:   - | 2012 Nissan Sentra with estimated 31,000 miles   |             |                       |     |  |                                 |
|  |           |              | Value \$ 8,775.00  |             |                       |     | 15,560.00  | 6,785.00                        |
| Account No.  |           |              | Value \$   |             |                       |     |  |                                 |
| Account No.  |           |              |  |             |                       |     |  |                                 |
|  |           |              | Value \$   |             |                       |     |  |                                 |
| 0 continuation sheets attached   |           |              | (Total of  | Sub<br>this |                       |     | 15,860.00  | 6,785.00                        |
|  |           |              | (Report on Summary of S  |             | Γota<br>dule          |     | 15,860.00  | 6,785.00                        |

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B6E (Official Form 6E) (4/13)

| •     |               |          |  |
|-------|---------------|----------|--|
| In re | Shirley Allen | Case No  |  |
| _     |               | Debtor , |  |

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian."

| Do not disclose the child's name. See, 11 U.S.C. \$112 and Fed. R. Bankr. P. 1007(m).   |
|---|
| If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed. |
| Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box lab   |
| "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.  Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet.   |
| listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.  |
| Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report thi total also on the Statistical Summary of Certain Liabilities and Related Data.  |
| ☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.   |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)   |
| ☐ Domestic support obligations  |
| Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).   |
| ☐ Extensions of credit in an involuntary case   |
| Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).   |
| ☐ Wages, salaries, and commissions  |
| Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).   |
| ☐ Contributions to employee benefit plans   |
| Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busine whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).   |
| ☐ Certain farmers and fishermen   |
| Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).  |
| ☐ Deposits by individuals   |
| Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).  |
| ■ Taxes and certain other debts owed to governmental units  |
| Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).   |
| ☐ Commitments to maintain the capital of an insured depository institution  |
| Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).  |
| ☐ Claims for death or personal injury while debtor was intoxicated  |
| Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).  |

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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| In re | Shirley Allen | Case No |  |
|-------|---------------|---------|--|
| •     |               | Debtor  |  |

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community CONTINGENT UZLIQUIDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, S P U T E D AND MAILING ADDRESS Н **AMOUNT** DATE CLAIM WAS INCURRED INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) Tax liability Account No. Internal Revenue Service 0.00 P.O. Box 7346 Philadelphia, PA 19101-7346 3,200.00 3,200.00 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet 1 of 1 continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 3,200.00 3,200.00 Total 0.00 (Report on Summary of Schedules) 3,200.00 3,200.00

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B6F (Official Form 6F) (12/07)

| In re | Shirley Allen | Case No |
|-------|---------------|---------|
| -     |               | Debtor  |

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| Account No. xxxxxxxxxxx8266   |                 | <u> </u><br> | Opened 6/04/14 Last Active 7/23/15  |     | +                     |          | 22,535.00       |
|---|-----------------|--------------|-------------------------------------|-----|-----------------------|----------|-----------------|
| Detroit, MI 48243   |                 |              | Opened C/04/44 Leat Asting 7/02/45  |     |                       |          | 22,535.00       |
| Ally Financial 200 Renaissance Ctr  |                 | -            | Automobile                          |     |                       |          |                 |
| Account No. xxxxxxxx2527  |                 | <u> </u>     | Opened 1/01/12 Last Active 8/06/14  |     | +                     |          | 100.00          |
| Afni, Inc.<br>Po Box 3097<br>Bloomington, IL 61702  |                 | -            | Collection Attorney At T            |     |                       |          |                 |
| Account No. xxxxxx6071  |                 |              | Opened 7/01/12 Last Active 12/01/12 | T N | D<br>A<br>T<br>E<br>D |          |                 |
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | H<br>W       |                                     | E   |                       | DISPUTED | AMOUNT OF CLAIM |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Shirley Allen | Case No |  |
|-------|---------------|---------|--|
| _     |               | Debtor  |  |

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|   | I c      | 11               | sband, Wife, Joint, or Community  |         | С   | U         | D           |   |
|---|----------|------------------|---|---------|-----|-----------|-------------|---|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | H<br>W<br>J<br>C | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIN<br>IS SUBJECT TO SETOFF, SO STATE. | 1       | 0   | N L Q U L | I<br>S<br>P | AMOUNT OF CLAIM                         |
| Account No.   |          |                  | Unsecured debt  |         | Т   | D A T E D |             |   |
| Commonwealth Edison<br>Attn: Bankruptcy Department<br>2100 Swift Drive<br>Oak Brook, IL 60523     |          | -                |   |         |     | ט         |             | 500.00                                  |
| Account No. xxxxxxx18N1   | T        |                  | Opened 12/01/11   |         |     |           |             |   |
| Commonwealth Financial<br>245 Main St<br>Dickson City, PA 18519                                   |          | -                | Collection Attorney Cottage Emergency<br>Physicians   |         |     |           |             |   |
|   |          |                  |   |         |     |           |             | 465.00                                  |
| Account No. xxxxxxxxxxx4539   |          |                  | Opened 1/01/15 Last Active 7/07/15  |         |     |           |             |   |
| Credit One Bank<br>Po Box 98873<br>Las Vegas, NV 89193  |          | -                | Credit Card   |         |     |           |             |   |
|   |          |                  |   |         |     |           |             | 323.00                                  |
| Account No. xxxxxxxxxxx3218   |          |                  | Opened 2/01/15 Last Active 6/25/15  |         |     |           |             |   |
| First Premier Bank<br>3820 N Louise Ave<br>Sioux Falls, SD 57107                                  |          | -                | Credit Card   |         |     |           |             |   |
| Account No.   |          |                  | Unsecured debt  |         |     |           |             | 865.00                                  |
| Global Payment Check Services, Inc.<br>P.O. Box 661038<br>Chicago, IL 60666                       | -        | -                |   |         |     |           |             | 2,500.00                                |
| Sheet no1 of _3 sheets attached to Schedule of  |          | <u> </u>         |   | Ç       | ubt | ota       | 1           | _,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| Creditors Holding Unsecured Nonpriority Claims  |          |                  | (Tota   | l of th |     |           |             | 4,653.00                                |

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| In re | Shirley Allen | Case No |  |
|-------|---------------|---------|--|
| _     |               | Debtor  |  |

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|  | С        | ш.,              | shand Wife laint or Community  |            | _           | U                     | D |                 |
|--|----------|------------------|--|------------|-------------|-----------------------|---|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)                    | CODEBTOR | H<br>W<br>J<br>C | sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED ANI CONSIDERATION FOR CLAIM. IF CLA IS SUBJECT TO SETOFF, SO STATE | IM         | COZH _ ZGEZ | N L I Q U L           |   | AMOUNT OF CLAIM |
| Account No.  |          |                  | Payday loan  |            | T           | D<br>A<br>T<br>E<br>D |   |                 |
| Payday Loan<br>8026 Cicero<br>Burbank, IL 60459  |          | -                |  |            |             | D                     |   | 500.00          |
| Account No. xxxxxxxxx1142  |          |                  | Opened 9/20/14 Last Active 1/07/15   |            |             |                       |   |                 |
| Peoples Gas<br>Attention: Bankruptcy Department<br>130 E. Randolph 17th Floor<br>Chicago, IL 60601                   |          | -                | Agriculture  |            |             |                       |   |                 |
|  |          |                  |  |            |             |                       |   | 2,286.00        |
| Account No. xxxxxxxxx5476  Peoples Gas Attention: Bankruptcy Department 130 E. Randolph 17th Floor Chicago, IL 60601 |          | -                | Opened 11/30/12 Last Active 10/03/13 Agriculture   |            |             |                       |   | 1.00            |
| Account No. xxxxxxxxx3773  | H        |                  | Opened 8/04/09 Last Active 9/25/12   |            |             |                       |   |                 |
| Peoples Gas<br>Attention: Bankruptcy Department<br>130 E. Randolph 17th Floor<br>Chicago, IL 60601                   |          | -                | Agriculture  |            |             |                       |   | 1.00            |
| Account No. xxxxxxxxxxxx9520   |          |                  | Opened 6/21/07 Last Active 2/23/09   |            |             |                       |   |                 |
| Salute/utb<br>Card Services<br>Po Box 105555<br>Atlanta, GA 30348  |          | -                | Credit Card  |            |             |                       |   | 1,038.00        |
| Sheet no. 2 of 3 sheets attached to Schedule of  | _        |                  |  | Q.         | libi        | ota                   | L | .,555.56        |
| Creditors Holding Unsecured Nonpriority Claims   |          |                  | (To  | otal of th |             |                       |   | 3,826.00        |

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| In re | Shirley Allen | Case No |
|-------|---------------|---------|
| •     |               | Debtor  |

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|  |          |             |   | 1 -         |              | -      |                 |
|--|----------|-------------|---|-------------|--------------|--------|-----------------|
| CREDITOR'S NAME,   | CO       | Hu          | sband, Wife, Joint, or Community  | 6           | U<br>N       | D      |                 |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)               | CODEBTOR | J<br>S<br>H | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | NTINGEN     | UNLIQUIDATED | SPUHED | AMOUNT OF CLAIM |
| Account No.  |          |             | Unsecured debt  | Τ̈́         | ΪE           |        |                 |
| Sprint P.O. Box 219554 Kansas City, MO 64121   |          | -           |   |             | Ď            |        | 626.00          |
| Account No.  | T        |             | Unsecured debt  |             |              |        |                 |
| St. Catherine's Hospital<br>541 Otis Bowen Dr.<br>Munster, IN 46321                            |          | -           |   |             |              |        |                 |
|  |          |             |   |             |              |        | 2,000.00        |
| Account No.  |          |             |   |             |              |        |                 |
| Account No.  |          |             |   |             |              |        |                 |
| Account No.  |          |             |   |             |              |        |                 |
| Account No.  |          |             |   |             |              |        |                 |
| Trecount No.   |          |             |   |             |              |        |                 |
|  |          |             |   |             |              |        |                 |
| Sheet no. 3 of 3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | <u> </u> | <u> </u>    | S<br>(Total of t  | Subt<br>his |              |        | 2,626.00        |
|  |          |             | (Report on Summary of So  |             | ota<br>lule  |        | 34,561.00       |

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B6G (Official Form 6G) (12/07)

| In re | Shirley Allen | Case No. |
|-------|---------------|----------|
| _     |               | Debtor   |

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.
State whether lease is for nonresidential real property.
State contract number of any government contract.

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B6H (Official Form 6H) (12/07)

| In re | Shirley Allen | Case No |
|-------|---------------|---------|
| -     |               | Debtor  |

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR NAME AND ADDRESS OF CREDITOR

Edward Cossey 7843 Colfax 2nd Apt Chicago, IL 60604-9000 Santander Consumer Usa Po Box 961245 Ft Worth, TX 76161

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| Fill               | in this information to identify your c   | ase:                          |   |                     |               | Ī                                      |                          |                              |                 |
|--------------------|--|-------------------------------|---|---------------------|---------------|--|--------------------------|------------------------------|-----------------|
|                    | otor 1 Shirley Allen   |                               |   |                     |               |  |                          |                              |                 |
|                    | otor 2 puse, if filing)  |                               |   |                     | _             |  |                          |                              |                 |
| Uni                | ted States Bankruptcy Court for the  | : NORTHERN DISTRIC            | T OF ILLINOIS                                 |                     | _             |  |                          |                              |                 |
|                    | se number<br>nown)   |                               |   |                     |               | Check if this is  An amend  A supplem  | ed filing<br>ent showir  |                              | n chapter       |
| $\bigcirc$         | fficial Form B 6I  |                               |   |                     |               |  |                          | ollowing date:               |                 |
|                    | chedule I: Your Inc  | ome                           |   |                     |               | MM / DD/                               | YYYY                     |                              | 12/13           |
| sup<br>spo<br>atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment | are married and not filing wi | ng jointly, and your<br>ith you, do not inclu | spouse<br>ide infor | is li<br>mati | ving with you, income on about your sp | lude infor<br>ouse. If m | mation about<br>ore space is | your<br>needed, |
| 1.                 |  |                               | Debtor 1                                      |                     |               | Debtor                                 | 2 or non-f               | iling spouse                 |                 |
|                    | If you have more than one job,   |                               | ☐ Employed                                    |                     |               |  | ☐ Employed               |                              |                 |
|                    | attach a separate page with information about additional employers.  | Employment status             | ■ Not employed                                |                     |               | ☐ Not €                                | ☐ Not employed           |                              |                 |
|                    |  | Occupation                    |   |                     |               |  |                          |                              |                 |
|                    | Include part-time, seasonal, or self-employed work.  | Employer's name               |   |                     |               |  |                          |                              |                 |
|                    | Occupation may include student or homemaker, if it applies.  | Employer's address            |   |                     |               |  |                          |                              |                 |
|                    |  | How long employed the         | nere?   |                     |               |  |                          |                              |                 |
| Par                | t 2: Give Details About Mor  | nthly Income                  |   |                     |               |  |                          |                              |                 |
| spou<br>If yo      | mate monthly income as of the duse unless you are separated.  u or your non-filing spouse have mee space, attach a separate sheet to                         | ore than one employer, co     |   |                     |               |  |                          |                              |                 |
|                    |  |                               |   |                     |               | For Debtor 1                           |                          | btor 2 or<br>ing spouse      |                 |
| 2.                 | List monthly gross wages, sala deductions). If not paid monthly,   |                               |   | 2.                  | \$            | 0.00                                   | \$                       | N/A                          |                 |
| 3.                 | Estimate and list monthly overt  | ime pay.                      |   | 3.                  | +\$           | 0.00                                   | +\$                      | N/A                          |                 |
| 4.                 | Calculate gross Income. Add lin  | ne 2 + line 3.                |   | 4.                  | \$            | 0.00                                   | \$                       | N/A_                         |                 |

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| Debte | or 1  | Shirley Allen   |            | Case  | number (if known) |       |                             |              |
|-------|---|---|------------|-------|-------------------|-------|-----------------------------|--------------|
|       |   |   |            | For   | Debtor 1          |       | Debtor 2 or n-filing spouse |              |
|       | Cop   | y line 4 here   | 4.         | \$    | 0.00              | \$    | N/A                         |              |
| 5.    | List  | all payroll deductions:   |            |       |                   |       |                             |              |
|       | 5a.   | Tax, Medicare, and Social Security deductions   | 5a.        | \$    | 0.00              | \$    | N/A                         | 4            |
|       | 5b.   | Mandatory contributions for retirement plans  | 5b.        | \$    | 0.00              | \$_   | N/A                         |              |
|       | 5c.   | Voluntary contributions for retirement plans  | 5c.        | \$    | 0.00              | \$_   | N/A                         |              |
|       | 5d.   | Required repayments of retirement fund loans  | 5d.        | \$    | 0.00              | \$    | N/A                         |              |
|       | 5e.   | Insurance   | 5e.        | \$_   | 0.00              | \$_   | N/A                         | <del>\</del> |
|       | 5f.   | Domestic support obligations  | 5f.        | \$_   | 0.00              | \$    | N/A                         |              |
|       | 5g.   | Union dues  | 5g.        | \$_   | 0.00              | \$    | N/A                         |              |
|       | 5h.   | Other deductions. Specify:  | _ 5h.+     | + \$_ | 0.00              | + \$_ | N/A                         | <u>\</u>     |
| 6.    | Add   | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.         | \$_   | 0.00              | \$_   | N/A                         | <u>\</u>     |
| 7.    | Cal   | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.         | \$_   | 0.00              | \$_   | N/A                         | <u>\</u>     |
| 8.    | List<br>8a.   | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total             |            |       |                   |       |                             |              |
|       |   | monthly net income.   | 8a.        | \$_   | 0.00              | \$_   | N/A                         |              |
|       | 8b.   | Interest and dividends  | 8b.        | \$_   | 0.00              | \$_   | N/A                         | <u>\</u>     |
|       | 8c.   | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c.        | \$    | 0.00              | \$    | N/A                         | 4            |
|       | 8d.   | Unemployment compensation   | 8d.        | \$    | 0.00              | \$    | N/A                         |              |
|       | 8e.   | Social Security   | 8e.        | \$    | 839.00            | \$    | N/A                         |              |
|       | 8f.   | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: | e<br>_ 8f. | \$_   | 0.00              | \$    | N/A                         |              |
|       | 8g.   | Pension or retirement income  | 8g.        | \$_   | 0.00              | \$    | N/A                         |              |
|       | 8h.   | Other monthly income. Specify:  | _ 8h.+     | + \$_ | 0.00              | + \$_ | N/A                         | <u>\</u>     |
| 9.    | Add   | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.         | \$    | 839.00            | \$_   | N/                          | /A           |
| 10.   | Calo  | culate monthly income. Add line 7 + line 9.   | 10. \$     |       | 839.00 + \$       |       | N/A = \$                    | 839.00       |
|       |   | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |            |       |                   |       |                             | 000.00       |
| 11.   | State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. |   |            |       |                   | 0.00  |                             |              |
| 12.   |   | I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certallies  |            |       |                   |       | 12. \$ <b>Comb</b>          |              |
| 12    | Do.   | you expect an increase or decrease within the year after you file this form   | 2          |       |                   |       | month                       | ly income    |
| 13.   | <b>■</b>  | you expect an increase or decrease within the year after you file this form No.   | :          |       |                   |       |                             |              |
|       | П   | Yes. Explain:   |            |       |                   |       |                             |              |

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| Fill | in this information to identify your case:  |  |                          |   |  |
|------|---|--|--------------------------|---|--|
| Deb  | otor 1 Shirley Allen  |  | Che                      | ck if this is:                            |  |
| Deb  | otor 2  |  |                          | An amended filing A supplement show       | wing post-petition chapter                             |
| (Spo | ouse, if filing)  |  |                          | 13 expenses as of                         | the following date:                                    |
| Unit | ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLING  | DIS  |                          | MM / DD / YYYY                            |  |
| 1    | se number<br>nown)  |  |                          | A separate filing fo 2 maintains a sepa   | r Debtor 2 because Debtor<br>rrate household           |
| O    | fficial Form B 6J   |  |                          |   |  |
| S    | chedule J: Your Expenses  |  |                          |   | 12/13  |
| info | as complete and accurate as possible. If two married people are primation. If more space is needed, attach another sheet to this further (if known). Answer every question.                 |  |                          |   |  |
|      | t 1: Describe Your Household  |  |                          |   |  |
| 1.   | Is this a joint case?  No. Go to line 2.  |  |                          |   |  |
|      | ■ No. Go to line 2.  ☐ Yes. Does Debtor 2 live in a separate household?   |  |                          |   |  |
|      | ☐ No ☐ Yes. Debtor 2 must file a separate Schedule J.   |  |                          |   |  |
| 2.   | Do you have dependents? ■ No  |  |                          |   |  |
|      | Do not list Debtor 1  | Dependent's relation Debtor 1 or Debtor          |                          | Dependent's age                           | Does dependent live with you?                          |
|      | Do not state the  |  |                          |   | □ No   |
|      | dependents' names.  |  |                          |   | ☐ Yes<br>☐ No  |
|      |   |  |                          |   | ☐ Yes  |
|      |   |  |                          |   | □ No   |
|      |   |  |                          |   | ☐ Yes  |
|      |   |  |                          |   | □ No   |
| 3.   | Do your expenses include ■ No   |  |                          |   | ☐ Yes  |
| O.   | expenses of people other than yourself and your dependents?   |  |                          |   |  |
| exp  | Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless your enses as of a date after the bankruptcy is filed. If this is a suppolicable date. | ou are using this fo<br>lemental <i>Schedule</i> | orm as a s<br>J, check t | upplement in a Cha<br>he box at the top o | apter 13 case to report<br>of the form and fill in the |
| the  | lude expenses paid for with non-cash government assistance if value of such assistance and have included it on <i>Schedule I: Y</i> ficial Form 6I.)  |  |                          | Your exp                                  | enses  |
| 4.   | The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.   | nclude first mortgage                            |                          | \$  | 250.00   |
|      | If not included in line 4:  |  |                          |   |  |
|      | 4a. Real estate taxes   |  | 4a. S                    | 2   | 0.00   |
|      | 4b. Property, homeowner's, or renter's insurance  |  | 4a. 3                    | ·   | 0.00   |
|      | 4c. Home maintenance, repair, and upkeep expenses   |  | 4c. S                    | ·   | 0.00   |
|      | 4d. Homeowner's association or condominium dues   |  | 4d. S                    | ·   | 0.00   |
| 5.   | Additional mortgage payments for your residence, such as hor  | me equity loans                                  | 5. 9                     | <b>5</b>                                  | 0.00   |

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| Debtor       | Shirley Allen  | Case num         | ber (if known) |                       |
|--------------|--|------------------|----------------|-----------------------|
| 6 !!         | Militian.  |                  |                |                       |
| -            | <b>ttilities:</b><br>a. Electricity, heat, natural gas   | 6a.              | \$             | 0.00                  |
|              | b. Water, sewer, garbage collection  | 6b.              |                | 0.00                  |
|              | c. Telephone, cell phone, Internet, satellite, and cable services  | 6c.              | ·              | 0.00                  |
|              | d. Other. Specify:   | 6d.              | ·              | 0.00                  |
| _            | ood and housekeeping supplies  | ou.              |                |                       |
|              | cou and nousekeeping supplies childcare and children's education costs   | 7.<br>8.         | \$<br>         | 75.00                 |
| -            |  | o.<br>9.         | \$             | 0.00                  |
|              | lothing, laundry, and dry cleaning<br>ersonal care products and services   |                  | ·              | 0.00                  |
|              | •  | 10.              | ·              | 0.00                  |
|              | ledical and dental expenses ransportation. Include gas, maintenance, bus or train fare.  | 11.              | \$             | 0.00                  |
|              | ransportation. Include gas, maintenance, bus or train rare. To not include car payments.   | 12.              | \$             | 35.00                 |
| 13. <b>E</b> | ntertainment, clubs, recreation, newspapers, magazines, and books  | 13.              | \$             | 0.00                  |
| 14. <b>C</b> | haritable contributions and religious donations  | 14.              | \$             | 0.00                  |
|              | nsurance.  |                  | ·              |                       |
| D            | o not include insurance deducted from your pay or included in lines 4 or 20.   |                  |                |                       |
| 1:           | 5a. Life insurance   | 15a.             |                | 0.00                  |
| 1:           | 5b. Health insurance   | 15b.             | \$             | 0.00                  |
| 1:           | 5c. Vehicle insurance  | 15c.             | \$             | 50.00                 |
| 1:           | 5d. Other insurance. Specify:  | 15d.             | \$             | 0.00                  |
| 16. <b>T</b> | axes. Do not include taxes deducted from your pay or included in lines 4 or 20.  |                  |                |                       |
|              | pecify:  | 16.              | \$             | 0.00                  |
|              | nstallment or lease payments:  |                  |                |                       |
|              | 7a. Car payments for Vehicle 1   | 17a.             | *              | 425.00                |
|              | 7b. Car payments for Vehicle 2   | 17b.             | · -            | 0.00                  |
|              | 7c. Other. Specify:  | 17c.             | \$             | 0.00                  |
|              | 7d. Other. Specify:  | 17d.             | \$             | 0.00                  |
|              | our payments of alimony, maintenance, and support that you did not report  | <b>as</b><br>18. | ¢              | 0.00                  |
|              | educted from your pay on line 5, Schedule I, Your Income (Official Form 6I).   | 10.              | φ              |                       |
|              | other payments you make to support others who do not live with you.  | 40               | <b>&gt;</b>    | 0.00                  |
|              | pecify:  | 19.              | our Income     |                       |
|              | ther real property expenses not included in lines 4 or 5 of this form or on So  Oa. Mortgages on other property  | 20a.             |                | 0.00                  |
|              | Ob. Real estate taxes  | 20a.<br>20b.     |                | 0.00                  |
|              |  | 20b.             |                |                       |
|              | Oc. Property, homeowner's, or renter's insurance Od. Maintenance, repair, and upkeep expenses  | 20d.<br>20d.     |                | 0.00                  |
|              | Oc. Homeowner's association or condominium dues  | 20d.<br>20e.     | ·              |                       |
|              |  |                  |                | 0.00                  |
| : i. U       | ther: Specify:   | 21.              | Φ+             | 0.00                  |
| 22. <b>Y</b> | our monthly expenses. Add lines 4 through 21.  | 22.              | \$             | 835.00                |
|              | he result is your monthly expenses.  |                  |                |                       |
| 23. <b>C</b> | alculate your monthly net income.  |                  |                |                       |
|              | 3a. Copy line 12 (your combined monthly income) from Schedule I.   | 23a.             | \$             | 839.00                |
|              | 3b. Copy your monthly expenses from line 22 above.   | 23b.             | -\$            | 835.00                |
|              |  |                  |                |                       |
| 2            | 3c. Subtract your monthly expenses from your monthly income.   | 22               | •              | 4.00                  |
|              | The result is your monthly net income.   | 23c.             | \$             | 4.00                  |
| Fo<br>m      | o you expect an increase or decrease in your expenses within the year after or example, do you expect to finish paying for your car loan within the year or do you expect you lodification to the terms of your mortgage?  No. |                  |                | decrease because of a |
|              | ] Yes.   |                  |                |                       |
|              | xplain:  |                  |                |                       |

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 $B6\ Declaration\ (Official\ Form\ 6$  - Declaration). (12/07)

### **United States Bankruptcy Court** Northern District of Illinois

| In re | Shirley Allen  |           |  | Case No. |   |
|-------|--|-----------|--|----------|---|
|       |  |           | Debtor(s)                                    | Chapter  | 7 |
|       | <b>DECLARATION C</b> DECLARATION UNDER F   |           |  |          |   |
|       | I declare under penalty of perjury the of 20 sheets, and that they are true and contact the same true and contact the same true and contact the same true are true and contact the same true and contact the same true are true and contact the same true and contact the same true are true are true are true and contact the same true are true are true are true are true and contact the same true are |           |  |          | _ |
| Date  | September 23, 2015   | Signature | /s/ Shirley Allen<br>Shirley Allen<br>Debtor |          |   |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | Shirley Allen |           | Case No. |   |
|-------|---------------|-----------|----------|---|
|       |               | Debtor(s) | Chapter  | 7 |

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE \$7,551.00 2015 YTD: Debtor Est. Social Security Income \$10,068.00 2014: Debtor Est. Social Security Income \$10,068.00 2013: Debtor Est. Social Security Income Case 15-32401 Doc 1 Filed 09/23/15 Entered 09/23/15 12:06:55 Desc Main Document Page 28 of 44

B7 (Official Form 7) (04/13)

2

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF TRANSFERS

AMOUNT STILL OWING

NAME AND ADDRESS OF CREDITOR

one c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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NAME AND ADDRESS OF CREDITOR OR SELLER Ally Financial 200 Renaissance Ctr Detroit, MI 48243 DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN January 2015

DESCRIPTION AND VALUE OF PROPERTY

Automobile

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR. IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

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#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

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#### 15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**ADDRESS** NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF **ENVIRONMENTAL** SITE NAME AND ADDRESS

GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF **ENVIRONMENTAL** DATE OF SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which None the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the

docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

**BEGINNING AND** NATURE OF BUSINESS ENDING DATES

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.



NAME

**ADDRESS** NAME

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

#### NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

**ADDRESS** 

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

None

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

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#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

#### 21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

#### 22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

None

**ADDRESS** 

DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

#### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\* \* \* \* \* \*

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date September 23, 2015
Signature /s/ Shirley Allen
Shirley Allen
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

# **United States Bankruptcy Court**Northern District of Illinois

|   | Northern Dis   | trict of Illinois                          |                     |                                   |
|---|--|--|---------------------|-----------------------------------|
| In re Shirley Allen   |  | Debtor(s)                                  | Case No.<br>Chapter | 7                                 |
|   |  |  | <u>-</u>            | ·                                 |
| CHAPTER   | R 7 INDIVIDUAL DEBTO   | R'S STATEMEN                               | Γ OF INTEN          | NTION                             |
| PART A - Debts secured by prop<br>property of the estate. At  | perty of the estate. (Part A mattach additional pages if nec |  | eted for <b>EAC</b> | <b>H</b> debt which is secured by |
| Property No. 1  |  |  |                     |                                   |
| Creditor's Name:<br>Capital One   |  | Describe Property S<br>Capital One secured |                     | t:                                |
| Property will be (check one): ☐ Surrendered   | ■ Retained   |  |                     |                                   |
| If retaining the property, I intend to ( ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain |  | oid lien using 11 U.S.C                    | C. § 522(f)).       |                                   |
| Property is (check one):  Claimed as Exempt   |  | ■ Not claimed as ex                        |                     |                                   |
| Property No. 2  |  |  |                     |                                   |
| Creditor's Name:<br>Santander Consumer Usa  |  | Describe Property 2012 Nissan Sentra       |                     |                                   |
| Property will be (check one):  ☐ Surrendered  | ■ Retained   |  |                     |                                   |
| If retaining the property, I intend to ( ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain |  | oid lien using 11 U.S.C                    | ↑ 8 522(f))         |                                   |
| Property is (check one):  | (tor example, a.e.   | -  |                     |                                   |
| ☐ Claimed as Exempt   |  | ■ Not claimed as ex                        | tempt               |                                   |
| <b>PART B</b> - Personal property subject<br>Attach additional pages if necessary.)                 |  | columns of Part B m                        | ust be complete     | ed for each unexpired lease.      |
| Property No. 1  |  |  |                     |                                   |
| Lessor's Name:  | Describe Leased Pro  | perty:                                     | Lease will be       | e Assumed pursuant to 11          |

□ YES

 $\square$  NO

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I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

| Date | September 23, 2015 | Signature | /s/ Shirley Allen |
|------|--------------------|-----------|-------------------|
|      |                    |           | Shirley Allen     |
|      |                    |           | Debtor            |

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## United States Bankruptcy Court Northern District of Illinois

| In re | Shirley Allen  |   | Case No.                         |                                     |  |  |  |
|-------|--|---|----------------------------------|-------------------------------------|--|--|--|
|       |  | Debtor(s)   | Chapter                          | 7                                   |  |  |  |
|       | DISCLOSURE OF COM  | PENSATION OF ATTOR  | NEY FOR DI                       | EBTOR(S)                            |  |  |  |
|       | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contemplating  | filing of the petition in bankruptcy, o   | or agreed to be paid             | to me, for services rendered or to  |  |  |  |
|       | For legal services, I have agreed to accept  |   | \$                               | 1,250.00                            |  |  |  |
|       | Prior to the filing of this statement I have receive   | ved   | \$                               | 0.00                                |  |  |  |
|       | Balance Due  |   |                                  | 1,250.00                            |  |  |  |
| 2.    | The source of the compensation paid to me was:   |   |                                  |                                     |  |  |  |
|       | ■ Debtor □ Other (specify):  |   |                                  |                                     |  |  |  |
| 3.    | The source of compensation to be paid to me is:  |   |                                  |                                     |  |  |  |
|       | ■ Debtor □ Other (specify):  |   |                                  |                                     |  |  |  |
| 4.    | ■ I have not agreed to share the above-disclosed co  | ompensation with any other person u   | nless they are mem               | bers and associates of my law firm. |  |  |  |
|       | ☐ I have agreed to share the above-disclosed comp copy of the agreement, together with a list of the   |   |                                  |                                     |  |  |  |
| 5.    | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  |   |                                  |                                     |  |  |  |
| į     | <ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li> <li>d. [Other provisions as needed]</li> </ul> |   |                                  |                                     |  |  |  |
| 6.    | By agreement with the debtor(s), the above-disclosed   | d fee does not include the following s  | service:                         |                                     |  |  |  |
|       |  | CERTIFICATION   |                                  |                                     |  |  |  |
|       | I certify that the foregoing is a complete statement of pankruptcy proceeding.   | f any agreement or arrangement for p  | ayment to me for re              | epresentation of the debtor(s) in   |  |  |  |
| Dated | d: September 23, 2015  | /s/ Margaret Molloy Margaret Molloy 63° THE SEMRAD LAW 20 S. Clark Street 28th Floor Chicago, IL 60603 (312) 913 0625 Fa rsemrad@semradla | / FIRM, LLC<br>x: (312) 913 0631 |                                     |  |  |  |

## CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of THE SEMRAD LAW FIRM, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me, representing my interests at a 2004 examination, nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I agree to pay The Semrad Law Firm, LLC \$1250 attorney fees plus costs in the amount of \$335.00 to represent my interests in the preparation and attendance of the Section 341 Meeting of Creditors; review of any reaffirmation agreements; filing of any necessary amendments; motions to avoid; motions to redeem; and case administration and monitoring. I further understand and agree that additional professional legal services will result in additional fees that are due THE SEMRAD LAW FIRM, LLC. Some of the additional services and fees are as follows:

THE SEMRAD LAW FIRM, LLC agrees to represent my interests in the preparation and filing of my Chapter 7 Petition and Schedules; preparation and attendance of the Section 341 Meeting of Creditors; review of any reaffirmation agreements; payment of court cost and case administration and monitoring; I further understand and agree that additional professional legal services will result in fees that are due THE SEMRAD LAW FIRM, LLC. Some of the additional services and fees are as follows:

Representing Client in Adversary Proceeding- \$300.00/hr
Motion to Sell Property - \$500.00
Application to Employ Professional/Motion to Approve Compromise - \$300.00
Motion to Incur Debt/Refinance - \$300.00
Motion to Reimpose Stay - \$300.00
Motion to Vacate Dismissal/Reopen Case - \$300.00 plus cost
Motion to Retain Tax Refund - \$300.00
Stay Violations- \$300.00/hr
Amending Schedules- \$100.00 plus cost

I understand that these fees must be paid before such work will be completed. I acknowledge and agree that as the above additional fees constitute post-petition services, they are not dischargeable in my Chapter 7 case. I understand that once my bankruptcy is filed, I will not be legally obligated to pay the balance of any unpaid fees to The Semrad Law Firm, LLC LLC. Any fees owing to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy may be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or its assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay unpaid fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw representation in the event that I do not

Initial: \_3A\_

sign a second retainer after filing my case promising to pay said fees or in the event that I do not pay said fees.

I further understand that the fee of \$1250 to be paid terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expenses of the firm.

I understand that any funds that I am tendering to The Semrad Law Firm, LLC as part of this advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expenses of the firm. I further understand that it is ordinarily my option to deposit funds with an attorney that shall remain my property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy case requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while others may be only ministerial in nature. I further understand that the benefit that I am receiving under this fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to file my case absent any extraordinary circumstances.

As THE SEMRAD LAW FIRM, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with THE SEMRAD LAW FIRM, LLC. This includes, but is not limited to, providing THE SEMRAD LAW FIRM, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings. I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that THE SEMRAD LAW FIRM, LLC is not responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Georgia are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by THE SEMRAD LAW FIRM, LLC or an agent thereof.

Date: 09/22/2015

Client

Attornay

\*DISCLAIMER

The creditors listed in your bankruptcy petition will receive notice of your bankruptcy filing from the Clerk of the United States Bankruptcy Court. Please be advised that it will be several days before these creditors receive the notice. Therefore, if you are concerned about a particular creditor taking immediate action against you, contact this creditor directly and provide the creditor with a copy of your Notice of Bankruptcy Filing. This is especially important if you are at risk of having you vehicle repossessed, real estate foreclosed, or wages garnished.

Shirley Allen Matter Number 452023-001

Initial:

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

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a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

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B 201B (Form 201B) (12/09)

# United States Bank

|         |  | a States Bankruptcy Cou<br>Jorthern District of Illinois   | ırt               |                               |
|---------|--|--|-------------------|-------------------------------|
| In re   | Shirley Allen                                  |  | Case No.          |                               |
|         | •  | Debtor(s)  | Chapter           | 7                             |
|         |  | OF NOTICE TO CONSUM<br>(b) OF THE BANKRUPTO                |                   | R(S)                          |
| Code.   | I (We), the debtor(s), affirm that I (we) have | Certification of Debtor received and read the attached not | ice, as required  | by § 342(b) of the Bankruptcy |
| Shirley | / Allen  | X /s/ Shirley Allen  |                   | September 23, 2015            |
| Printed | l Name(s) of Debtor(s)                         | Signature of De  | btor              | Date                          |
| Case N  | No. (if known)                                 | X  |                   |                               |
|         |  | Signature of Joi   | nt Debtor (if any | y) Date                       |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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## United States Bankruptcy Court Northern District of Illinois

| In re | Shirley Allen                              |   | Case No.                      |               |
|-------|--|---|-------------------------------|---------------|
|       |  | Debtor(s)   | Chapter 7                     |               |
|       | VE   | RIFICATION OF CREDITOR M                            | IATRIX                        |               |
|       |  | Number of   | Creditors:                    | 20            |
|       | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credit             | tors is true and correct to t | he best of my |
| Date: | September 23, 2015                         | /s/ Shirley Allen Shirley Allen Signature of Debtor |                               |               |

Afni, Inc Case 15-32401 Doc 1 Pled 09/23/15012906:550 Desc Main Po Box 3097 P. Dockment 610 Page 44 of 44 Chicago, IL 60666

Ally Financial 200 Renaissance Ctr Detroit, MI 48243 Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346

Payday Loan Att PO BOX 6416 8026 Cicero Carol Stream, IL 60197 Burbank, IL 60459

Peoples Gas Attention: Bankruptcy Department 130 E. Randolph 17th Floor Chicago, IL 60601 Capital One P.O. Box 85015 Richmond, VA 23285

Peoples Gas
Attention: Bankruptcy Department
130 E. Randolph 17th Floor Cb/carson 3100 Easton Square Pl Columbus, OH 43219 Chicago, IL 60601

Check N Go Peoples Gas 1008 Wesst Roosevelt Blvd Attention: Bankruptcy Department 130 E. Randolph 17th Floor Chicago, IL 60601 Monroe, NC 28110

Commonwealth Edison Salute/utb
Attn: Bankruptcy Department Card Services 2100 Swift Drive Po Box 105555
Oak Brook, IL 60523 Atlanta, GA 30348

Commonwealth Financial Santander Consumer Usa 245 Main St Po Box 961245 Dickson City, PA 18519 Ft Worth, TX 76161

Sprint P.O. Box 219554 Kansas City, MO 64121 Credit One Bank Po Box 98873 Las Vegas, NV 89193

First Premier Bank St. Catherine's Hospital 3820 N Louise Ave 541 Otis Bowen Dr. Sioux Falls, SD 57107 Munster, IN 46321